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FEC FORM 1

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STATEMENT OF ORGANIZATION

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Office Use Only NAME OF Example: If typing, type (Check if name X 12FE4M5 COMMITTEE (in full) is changed) over the lines. ALSTOM, INC. POLITICAL ACTION COMMITTEE, INC. 2000 Day Hill Road ADDRESS (number and street) (Check if address is changed) 06095 Windsor CITY STATE ZIP CODE COMMITTEE'S E-MAIL ADDRESS (Please provide only one e-mail address) (Check if address is changed) COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) 2. DATE 2 0 0 9 C 0 0 4 2 2 8 3 2 **FEC IDENTIFICATION NUMBER** X IS THIS STATEMENT NEW (N) AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. MICHAEL J. TOLPA Type or Print Name of Treasurer 2009 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use Toll Free 800-424-9530 (Revised 02/2009)

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